

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name &amp; Address</i> ): TELEPHONE NO:   ATTORNEY FOR ( <i>Name</i> ):	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF BUTTE</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Butte County Courthouse            One Court Street Oroville, CA 95965  <b>(530) 538-7002</b> </div> <div style="width: 48%;"> <input type="checkbox"/> Chico Courthouse            655 Oleander Chico, CA 95926  <b>(530) 532-7009</b> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Paradise Courthouse            747 Elliott Road Paradise, CA 95969  <b>(530) 532-7018</b> </div> <div style="width: 48%;"> <input type="checkbox"/> Gridley Courthouse            239 Sycamore Gridley, CA 95948  <b>(530) 532-7006</b> </div> </div>	
PLAINTIFF(S):  DEFENDANT (S):	
<b>MEDIATOR'S FEE STATEMENT</b> [LR § 5.9]	CASE NUMBER:

Pursuant to LR §5.9, I hereby submit my Request for Payment of Mediator's Fees in the above-entitled matter. I declare that I was the duly appointed Mediator and that I fully performed all official responsibilities herein.

Mediation took place on [date(s)]: \_\_\_\_\_

and took a total of : \_\_\_\_\_ hours.

Statement of Agreement or Nonagreement has been submitted to the Clerk's Office for filing.

I hereby certify under penalty of perjury, under the law of the State of California, that the foregoing is true and correct.

DATE: \_\_\_\_\_, 20\_\_\_\_\_  
 \_\_\_\_\_  
 Mediator's Signature

I hereby affirm that the above-named Arbitrator has completed all official duties required and has filed the Statement of Agreement or Nonagreement; and that the requested Mediator's Fee is in accordance with LR § 5.9. The requested Mediator's Fee in the amount of \$ \_\_\_\_\_ is hereby approved.

DATE: \_\_\_\_\_, 20\_\_\_\_\_  
 \_\_\_\_\_  
 Judge of the Superior Court